Substitute for Form PTO-875									Application to a valid OMB control sube				
									Application for Docket Humber		Humber TO		
CLAIMS AS FILED - PART I										912	1321		
FOR		MMOCOGNA		(Column 2)		SMALL ENTITY		•	OR '	· OTI	· OTHER THAT SMALL ENTIT		
8ASIC FEE (37, OFR 1.16(a	n' -			NUMBER EXTRA	NUMBER EXTRA		· RATE FEE		1		20 5141111		
TOTAL CLATE						11 . 1		-		RATE	- FB		
(37 OFR 1.16(c)	<u>))</u> .	minus 20 .		•	\neg	75			OR		3		
(37 OFR 1.16(b)	CLAIMS	minus 3		<u>·</u>		x , 20		1.	OR	x 50.			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1 16/41)					_	x i 100	=		OR	x , 200	-		
						+5:180			~ t	,360	+		
"If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL	1		ÒB [+ 82 40	<u> </u>		
CLAIMS AS AMENDED - PART II							L	٠ لــ	OR	TOTAL	<u></u>		
	· (Column 1					-							
× 21-1	, CLAIMS		(Column		3)	SMALL	ENTITY		OR .	OTHE	R THAN		
	REMAININ AFTER		HIGHES	R. PRESEN	,] [RATE	T	7		SMALL	ENTITY		
Total	AMENOME	VT.	PREVIOUS PAID FOR	LY EXTRA	\perp	KATE	ADDI-	1.		RATE	ADD		
(31 OFR 1,16(c)	20	Min	" 20	= /	- -	- O.E.	FEE		- 1		TIONIL		
W DI OFR 1.1601	1. 1	Minu			-J L	x <u>, 25 </u>		OF	. [.	.50	FEE		
4						s 100.		7 "	_				
FRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						100	 	-√ °F	× :	200			
M2/2						S 18()=	·	OR	+ 5	360			
10/2010	(Column 1)	•		•		OO'L FEE		OR		TAL D'L FEE			
a	CLAIMS	7	(Column 2	(Column 3)			,			SCAEE (
El.	REMAINING AFTER	ı	NUMBER	PRESENT		RATE .		7					
∑ Total	AMENDMENT		PREVIOUSLY PAID FOR	EXTRA	1.1	·wie	TIONAL	1	6	MIE	ADDÍ		
DI OFFI 1.16(cl)	1. 20 ·	Minus	20	•	ŀ	25	FEE	l .	L	L	FEE .		
Total DI GFR 1.16(c) Independent OFR 1.16(c)	17	'Minus	111	 	×	<u>,25.</u>		OR	X	50.	1,55		
FIRST PRESENTATION OF USE TO						100.		OR	4	20a.			
FRIST PRESENTATION OF MILITIPLE DEPENDENT CLAM (37 CFR 1.16(d))						180.							
						TAL	./	OR	TOTA	<u>60</u>			
	(Column 1)	-		•	~0	OL FEE		OR	ADDI	EEE			
ပ	CLAIMS . REMAINING	1	(Column 2). HIGHEST	(Column 3)									
z	AFTER	I	NUMBER PREVIOUSLY	PRESENT	1.	RATE	ADDI:						
Total (IT OFR 1.16(c)) Independent	AMENOMENT		PAID FOR	EXTRA	. [TIONAL		. RA		ADDI-		
(37 CFR 1.16(c))	·	Minus	•••			25_	FEE				TIONAL FEE		
		Minus	*** .			100.		OR	x 5 5	O _F			
FIRST PRESENT	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							OR	x s 25				
CE DEPENDENT CLAIM (37 OFR 1.16(d))						80.	. 7		. 3				
* If the entry in action of the entry in acti								. OR [TOTAL	<u>~</u>	<u></u>		
the Highest Miles and the entry to column 2 write to is set to a											· [.		
collection of inform	ration is required	The "Highest Number Previously Paid For (IN THIS SPACE is less than J. enter "3" collection of information is required by 37 CFB 16 CFB											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for rebucing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2